



ARIZONA

CHANGING HOW OPEN INDEPENDENCE CAN ENSURE SUCCESS (CHOICES) PROVIDER HANDBOOK

A TECHNICAL ASSISTANCE MANUAL FOR PROVIDERS IN THE CHOICES NETWORK

INFORMATION CONTAINED IN THIS MANUAL WAS COMPILED FROM INFORMATION OFFERED BY THE NATIONAL INSTITUTE OF DRUG ABUSE, SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION, CENTER FOR SUBSTANCE ABUSE TREATMENT, THE GOVERNOR'S OFFICE FOR CHILDREN, YOUTH AND FAMILIES, PIMA PREVENTION PARTNERSHIP, AND LOCAL DRUG COURTS UNDER THE DIRECTION OF STATE OF ARIZONA SUPERIOR COURTS.

A cooperative initiative offered by the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Treatment (CSAT), Governor's Office for Children, Youth, and Families, Pima Prevention Partnership, local participating drug courts and local providers willing to offer choice in services to meth-affected offenders.

PROVIDER HANDBOOK FOR THE ARIZONA CHOICES PROGRAM

PURPOSE

The CHOICES program is a new service delivery system in the State of Arizona funded by the Access to Recovery grant program administrated by SAMHSA. The CHOICES program offers a client-centered system that incorporates a holistic approach to substance abuse treatment for meth-affected clients served by local Arizona Drug Courts. This holistic approach offers the client a choice of providers in a continuum of treatment and recovery support services to meet their social, educational, psychological, physical and spiritual needs. The CHOICES program expands traditional treatment service offerings to include services such as transportation, childcare, job enhancement skills, and spiritual counseling. The CHOICES program also strives to include faith-based organizations within the treatment continuum. Faith-based organizations can offer the client support services throughout their recovery journey.

The CHOICES program utilizes a client centered assessment to identify individual need to develop a comprehensive treatment program that will lead to long-term recovery and a sustained drug-free lifestyle. Clients then choose the provider offering these identified services from an array of community and faith-based providers. A Voucher Management System (VMS) is utilized to refer clients to providers and authorize the type and quantity of services needed as identified by the assessment. The VMS also serves as the billing method for treatment/recovery support services rendered. The VMS coordinates the clients, providers, and drug court activities in the new treatment delivery system.

This manual offers technical assistance to treatment and recovery support services providers contracted with local drug courts under the CHOICES program. The manual is designed in sections with hyperlinks to provide easy navigation through the sections. ***Disclaimer: Information contained in this document does not offer legal advice to potential providers nor does it protect potential providers from legal action. This document only serves to provide information regarding the CHOICES program. It is highly recommended that all providers seek legal advice regarding their particular agency when necessary.***

PHILOSOPHY

The CHOICES program has adopted the National Institute of Drug Abuse principles of effective substance abuse treatment as follows:

PRINCIPLES OF EFFECTIVE TREATMENT

1. **No single treatment is appropriate for all individuals.** Matching treatment settings, interventions, and services to each individual's particular problems and needs is critical to his or her ultimate success in returning to productive functioning in the family, workplace, and society.

2. **Treatment needs to be readily available.** Because individuals who are addicted to drugs may be uncertain about entering treatment, taking advantage of opportunities when they are ready for treatment is crucial. Potential treatment applicants can be lost if treatment is not immediately available or is not readily accessible.
3. **Effective treatment attends to multiple needs of the individual, not just his or her drug use.** To be effective, treatment must address the individual's drug use and any associated medical, psychological, social, vocational, and legal problems.
4. **An individual's treatment and services plan must be assessed continually and modified as necessary to ensure that the plan meets the person's changing needs.** A patient may require varying combinations of services and treatment components during the course of treatment and recovery. In addition to counseling or psychotherapy, a patient at times may require medication, other medical services, family therapy, parenting instruction, vocational rehabilitation, and social and legal services. It is critical that the treatment approach be appropriate to the individual's age, gender, ethnicity, and culture.
5. **Remaining in treatment for an adequate period of time is critical for treatment effectiveness.** The appropriate duration for an individual depends on his or her problems and needs (see pages 11-49). Research indicates that for most patients, the threshold of significant improvement is reached at about 3 months in treatment. After this threshold is reached, additional treatment can produce further progress toward recovery. Because people often leave treatment prematurely, programs should include strategies to engage and keep patients in treatment.
6. **Counseling (individual and/or group) and other behavioral therapies are critical components of effective treatment for addiction.** In therapy, patients address issues of motivation, build skills to resist drug use, replace drug-using activities with constructive and rewarding nondrug-using activities, and improve problem-solving abilities. Behavioral therapy also facilitates interpersonal relationships and the individual's ability to function in the family and community.
7. **Medications are an important element of treatment for many patients, especially when combined with counseling and other behavioral therapies.** Methadone and levo-alpha-acetylmethadol (LAAM) are very effective in helping individuals addicted to heroin or other opiates stabilize their lives and reduce their illicit drug use. Naltrexone is also an effective medication for some opiate addicts and some patients with co-occurring alcohol dependence. For persons addicted to nicotine, a nicotine replacement product (such as patches or gum) or an oral medication (such as bupropion) can be an effective component of treatment. For patients with mental disorders, both behavioral treatments and medications can be critically important.
8. **Addicted or drug-abusing individuals with coexisting mental disorders should have both disorders treated in an integrated way.** Because addictive disorders and mental disorders often occur in the same individual, patients presenting for either condition should be assessed and treated for the co-occurrence of the other type of disorder.

9. **Medical detoxification is only the first stage of addiction treatment and by itself does little to change long-term drug use.** Medical detoxification safely manages the acute physical symptoms of withdrawal associated with stopping drug use. While detoxification alone is rarely sufficient to help addicts achieve long-term abstinence, for some individuals it is a strongly indicated precursor to effective drug addiction treatment.
10. **Treatment does not need to be voluntary to be effective.** Strong motivation can facilitate the treatment process. Sanctions or enticements in the family, employment setting, or criminal justice system can increase significantly both treatment entry and retention rates and the success of drug treatment interventions.
11. **Possible drug use during treatment must be monitored continuously.** Lapses to drug use can occur during treatment. The objective monitoring of a patient's drug and alcohol use during treatment, such as through urinalysis or other tests, can help the patient withstand urges to use drugs. Such monitoring also can provide early evidence of drug use so that the individual's treatment plan can be adjusted. Feedback to patients who test positive for illicit drug use is an important element of monitoring.
12. **Treatment programs should provide assessment for HIV/AIDS, hepatitis B and C, tuberculosis and other infectious diseases, and counseling to help patients modify or change behaviors that place themselves or others at risk of infection.** Counseling can help patients avoid high-risk behavior. Counseling also can help people who are already infected manage their illness.
13. **Recovery from drug addiction can be a long-term process and frequently requires multiple episodes of treatment.** As with other chronic illnesses, relapses to drug use can occur during or after successful treatment episodes. Addicted individuals may require prolonged treatment and multiple episodes of treatment to achieve long-term abstinence and fully restored functioning. Participation in self-help support programs during and following treatment often is helpful in maintaining abstinence.

EVIDENCE-BASED PRACTICES

In addition to the NIDA's recommendations, Arizona Probation Departments utilize Evidence Based Practices for offender rehabilitation programs. Evidence-Based Practices (EBP) are principles proven effective in reducing criminogenic factors in offenders' lives. CHOICES providers should utilize these principles when designing direct services for CHOICES clients.

The Principles of Evidence-Based Practices are:

1. Assess Actuarial Risk/Need (Risk Principle). Approved clinical services require the professional to complete an accepted assessment/evaluation of the client's level of substance abuse and the continued risk of using substances.
2. Enhance Intrinsic Motivation. Approved clinical services require professionals utilize methods to increase the client's intrinsic motivation to live a substance and crime free lifestyle to promote self-efficacy and responsibility for recovery.

3. Target Interventions (Need Principle). Approved clinical services require professionals to consider the factors in a client's life that may lead to further criminal and substance abusing behavior. Examples of these criminogenic needs are:
 - a. Client demonstrates anti-social attitudes indicative of continued substance use;
 - b. Client reports peer or family associations that support continued substance abuse;
 - c. Client lives in a dysfunctional family/living environment that promotes continued substance abuse;
 - d. Client lacks current or stable employment;
 - e. Client manifests poor self-control and/or problem-solving skills necessary to avoid or survive high-risk situations that promote or exacerbate substance abuse or lead to relapse.
 - f. Client exhibits other behaviors observed by the professional that may lead to increased substance usage.
4. Skill Train with Directed Practice. Approved clinical services require professionals to utilize cognitive behavioral treatment methods with referred clients. Cognitive-behavioral techniques that examine the thoughts, feelings, and attitudes of the client; role-playing, and positive reinforcements are key components.
5. Increase Positive Reinforcement. Approved clinical services require professionals to utilize positive reinforcement, when appropriate. EBP research studies suggest a ratio of four (4) positive reinforcements for each negative when reinforcing newly developing skills.
6. Engage Clients in Ongoing Natural Supports in the Community. Approved clinical services require professionals to develop the client's involvement with pro-social influences and support systems in their communities.
7. Measure Relevant Processes. Approved clinical services must measure outcomes of client's treatment experience and regularly evaluate staff performance.
8. Provide Measurement Feedback. Approved clinical services must provide ongoing feedback to clients regarding their treatment progress and positive changes.

The implementation of Evidence-Based Practices has been found to reduce recidivism in the range of 25 to 30 percent. Treatment interventions which have produced these long-term outcomes are characterized by matching the level and intensity of the intervention to the level of the adult client's risk. Effective interventions will: 1) be behaviorally based, 2) focus on changing criminal thinking, attitudes and beliefs, 3) provide multiple opportunities for role play and skill practice, and 4) provide pro-social involvement in the community. Preferred treatment will involve the individual's social and community system, and will be cognitively based in accordance with the Evidence-Based Practices.

For more information about treating persons involved in the criminal justice system, the [Substance Abuse Treatment for Adults in the Criminal Justice System](#) published by Center for Substance Abuse Treatment (CSAT), a division of the Substance Abuse and Mental Health Services Administration (SAMHSA) offers assistance in developing effective strategies for treating offenders.

Clients receiving services through the CHOICES initiative are court ordered to participate in treatment. Further, each client will be on probation supervision with a participating drug court. Treatment and Recovery Support Services (RSS) providers will be requested to provide client progress information to the drug court personnel. Further, it may be necessary to testify to the client's participation in your programs. Each county may have additional requirements of providers.

The CHOICES program delivery system requires multiple providers to work from a common treatment plan developed by treatment providers, RSS providers, drug court case managers and drug court judges. All providers should be prepared to work as a team to render services to meth-affected drug court clients. The voucher issued for services will be a part of a whole treatment continuum identified to meet the needs of the client.

CLIENT RIGHTS

All CHOICES treatment providers shall respect the rights of clients and maintain the highest level of professionalism. The CHOICES program requires all treatment providers to comply with the Client's Rights Provisions in AZ Administrative Code, Title 9, Chapter 20, R9-20-203. CHOICES treatment providers shall provide, in writing, a document informing each client served of their rights under Arizona law.

CHOICES PARTNERS

The Center for Substance Abuse Treatment (CSAT), a department of the Substance Abuse and Mental Health Services Agency ([SAMHSA](#)) provides the Arizona Governor's Office funding for the CHOICES program through the Access to Recovery initiative. The Governor's Office for Children, Youth and Families ([GOCYF](#)) administers the grant funds and provides grant activity oversight for the CHOICES program.

Pima Prevention Partnership ([PPP](#)) provides technical support for the Voucher Management System (VMS) including training on the system, troubleshooting, and security. PPP also provides technical support for the Government Performance and Reporting Act (GPRA) compliance requirements for any state or agency receiving federal grant funds.

To view the Organizational/Contact chart for the Arizona CHOICES program, please [click here](#).

ELIGIBLE PROVIDERS

Organizations providing services in the CHOICES network must comply with minimum licensing and contractual terms. The authorization process includes the following:

1. Completed contract submitted to the appropriate drug court. Agencies are required to provide supplemental information, when necessary to complete the application process.

For the application process, please [click here](#).

ELIGIBLE CLIENTS

Clients eligible for services offered through the CHOICES service network must be a felony offender served by one of the participating Arizona Drug Courts and;

1. Been living in a non-restricted setting and has experienced meth-involved behavior within the last 90 days and is in need of methamphetamine related treatment services to meet their treatment needs.

Or;

2. Been living in a restricted environment and experienced meth-involved behavior during the 90 day period prior to entering the restricted environment and is in need of methamphetamine related treatment services to meet their treatment needs.

APPROVED SERVICES

CHOICES Clinical Services

Clinical services provided and reimbursed under the ATR grant shall be performed by persons satisfying the Arizona Board of Behavioral Health Examiners licensing requirements. Clinical services must be provided by direct service personnel licensed as one of the following:

1. Licensed Substance Abuse Technician (LSAT)
2. Licensed Associate Substance Abuse Counselor (LASAC)
3. Licensed Independent Substance Abuse counselor (LISAC)
4. Licensed Associate Marriage and Family Therapist (LAMFT)
5. Licensed Marriage and Family Therapist (LMFT)
6. Licensed Associate Counselor (LAC)
7. Licensed Professional Counselor (LPC)
8. Licensed Bachelor Social Worker (LBSW)
9. Licensed Master Social Worker (LMSW)
10. Licensed Clinical Social Worker (LCSW)
11. Licensed Clinical Psychologist (PHD)
12. Licensed Medical Doctor (MD)
13. Licensed Nurse Practitioner (NP)
14. Licensed Physicians Assistant (PA)
15. Licensed Dr. of Osteopathy (DO)

For more information regarding licensing requirements, please visit the Arizona Behavioral Health Examiners website at <http://www.bbhe.state.az.us/lic%20sa.htm>.

Treatment Providers must comply with all requirements for services and documentation that may be required by each drug court in addition to those listed in this Provider Handbook. Each drug court will complete procurement procedures that may require additional service activities than those listed herein. The requirements in this Handbook are minimums and do not limit the drug courts from requiring further documentation and/or services from providers. This Handbook only provides technical assistance to those providers desiring to provide services through the CHOICES initiative. The information in this Handbook does not bind the drug courts, nor does it replace each drug court's procurement processes.

APPROVED CLINICAL SERVICES

Screening/Assessment

Screening/Assessment activities shall be completed by a licensed professional as listed above and shall minimally include:

1. Widely accepted substance abuse screening/evaluation tool, offering objective measurement of the client's substance abuse issues such as:
 - Alcohol Dependency Scale (ADS)
 - Addiction Severity Index (ASI)
 - Drug Abuse Screening Test (DAST-20)
 - Substance Abuse Subtle Screening Inventory-2 (SASSI-2)
 - Simple Screening Instrument for Substance Abuse (SAMHSA, TIP 44)
 - Adult Substance Use Survey (ASUS)
2. Clinical interview exploring the client's involvement with drugs and/or alcohol to include their social, physical, psychological and spiritual impairment due to usage and/or abuse.
3. Maintain services rendered per VMS policies and procedures.

Acceptable billing unit: Cost per assessment/screening

Brief Intervention

Encompasses the specific treatment strategies, therapies, or techniques that are used to treat one or more disorders; an effective technique used to help individuals abstain or reduce their use of alcohol and/or drugs. Brief intervention services shall be limited to three sessions of one hour or less and shall be limited to the following:

1. Services assessing the client's willingness to participate in the treatment process.
2. Identification of client's goals for treatment and special needs during the treatment process.
3. Referral to treatment programs that meet the overall needs of the client during the treatment process, i.e. language, gender services, age appropriate services.
4. Maintain services rendered in VMS.

Acceptable Billing Unit: Per face to face session. Face to face session shall be 60 minutes per session. (50 minutes for direct service/10 minutes for documentation/VMS activities).

Treatment Planning

Treatment planning outlines the description of the specific behavioral health services that an agency documents in the client record. **Treatment** means (a) A professionally recognized treatment that is provided to a client or the client's family to improve the client's behavioral health issue or (b) For court-ordered alcohol and drug treatment. Treatment planning for drug abusing offenders who are living in or re-entering the community should include strategies to prevent and treat serious chronic medical conditions. All treatment plans shall be updated as necessary and, at a minimum, every 90 days.

Treatment Planning shall minimally include:

1. Preparation by a licensed professional as cited above.
2. The date prepared.
3. The time period of the plan.
4. Clear statement of the type and level of substance abuse issues presented by the client.
5. Measurable goals for the treatment process.
6. Behaviorally defined objectives to fulfill treatment goals.
7. Verification of the client's input into the goals and objectives of the plan.
8. Signatures of the professional who prepared the plan and the client.
9. Maintain services rendered in the VMS.

Acceptable Billing Unit: Per treatment plan cost. Billing for treatment planning will only be assessed if developed as a separate and distinct service. Treatment planning involved with treatment modalities should be incorporated into the total treatment cost rate charged. Treatment planning is included if provider is different than screening/assessment provider.

For a Sample Treatment Plan, please click [here](#).

Detoxification/Medical Care

Behavioral health services and medical services provided to reduce or eliminate a client's dependence on, or to provide treatment for a client's symptoms attributed to withdraw from alcohol or other drugs; and at a Level 1 psychiatric acute hospital or a Level 1 sub-acute agency ([AZ Administrative Code, Title 9, Chapter 20, R9-20-101](#)). Medical detoxification used to safely manage the acute physical symptoms of withdrawal associated with stopping drug use.

1. Services provided by a facility licensed by the Arizona Behavioral Health Examiners as a short-term residential substance abuse treatment facility. Providers shall submit a copy of the facility license in the application process.
2. Treatment planning as outlined in the Treatment Planning section of this document.

3. Provide [progress reports](#) and a discharge/aftercare plan to the Drug Court as to the client's progress as requested.
4. Maintain services rendered in VMS.

Acceptable Billing Unit: Per Day Cost. Ensure the per day cost includes housing, food, daily supplies, treatment, and supervision costs of housing clients in psychiatric acute hospital or Level I sub-acute agency.

Individual Counseling

The therapeutic interaction between a client by a professional or behavioral health technician intended to improve, eliminate, or manage one or more health issues ([AZ Administrative Code, Title 9, Chapter 20, R9-20-101](#)). Providers offering individual counseling will:

1. Preview existing social history and other relevant information.
2. Provide individual counseling as outlined on the client's treatment plan.
3. Maintain [progress notes](#) of client sessions.
4. Provide [progress reports](#) to the respective drug courts as requested.
5. Maintain services rendered in VMS.

Acceptable Billing Unit: Per client session. (50 minutes for direct service and 10 minutes for documentation/VMS activities).

Group Substance Abuse Treatment Services:

1. Intensive Outpatient Treatment Services (IOP):

- a) IOP shall consist of a minimum of 6 hours per week and a maximum of 9 hours per week of mind intensive outpatient group therapy sessions. Curriculum shall be evidence-based utilizing cognitive-based therapy and best practices principles.
- b) Requirements: Client attends as directed. Individual counseling sessions, make-up sessions, and/or two treatment sessions in one day are not permissible.

Billing unit: Per face to face session, as defined per contract.

2. Standard Outpatient Treatment Services (SOP):

- a) SOP shall consist of a minimum of three hours per week and a maximum of 5 hours per week standard outpatient group therapy sessions. Treatment shall be evidence-based utilizing cognitive-based therapy.
- b) Requirements: Client attends as directed; individual counseling sessions, make-up sessions, and/or two treatment sessions in one day not permissible. Client must attend a minimum of 3-5 hours per week.

Acceptable billing unit: Per face to face session, as defined per contract.

3. Relapse Prevention

Service for probationers in a non-residential setting that facilitates maintaining abstinence as well as provide help for probationers who experience relapse. Providers offering Relapse prevention shall:

- a) Provide recovery skill instruction to improve self-awareness of the signs of relapse.
- b) Provide coping skills and personal management instruction.
- c) Assist the client with development of a recovery plan.
- d) Provide feedback and review of the recovery plan.
- e) Document all sessions in case notes.
- f) Complete progress reports as requested by the drug court.
- g) Complete discharge summary noting the progress/lack of progress of the client.
- h) Maintain all services rendered in the VMS.

Acceptable Billing Unit: Per session, defined by contract.

4. Substance Abuse Education (SAE)/Cognitive Skills

- a) SAE shall consist of 16 hours of group education utilizing a Didactic/Process format based on a Cognitive Behavioral Therapy (CBT) intervention model curriculum or other evidence-based practices. Educational groups shall address causes and consequences of substance abuse.
- b) Group sessions will have no more than 30 clients per group and will be eight (8) 2-hour sessions over a maximum of a 12 week time period.
- c) Requirements: Client attends as directed. Individual counseling sessions, make-up sessions, and/or two treatment sessions in one day are not permissible.
- d) SAE groups shall be separate and attended by those clients identified through approved evaluation methods as needing the same level of substance abuse education.
- e) Maintain a record of all services rendered in the VMS.

Acceptable billing unit: Per face to face session. Face to face session shall be at least 120 minutes per session. (110 minutes for direct service/10 minutes for documentation/VMS activities).

Residential Treatment

Residential Treatment shall be defined by the following criteria:

Accepted treatment or counseling modalities for alcohol and other drug disorders where the client resides at the facility. Accepted treatment or counseling shall follow evidence-based practices. Residential services must include the following:

- 1. Services provided by a facility licensed by the Arizona Behavioral Health Examiners as a residential substance abuse treatment facility. Providers shall submit a copy of the facility license in the application process.

2. The facility shall comply with all regulations pertaining to licensing.
3. Treatment planning as outlined in the Treatment Planning section of this document.
4. Counseling provided by licensed professionals as outlined in the contracting process.
5. Maintained services rendered in VMS.

Acceptable Billing Unit: Per Day Cost. Ensure the per day cost includes housing, food, daily supplies, treatment, and supervision costs of housing clients in residential treatment. Additional costs for the client will not be approved unless services needed are in addition to the program offered within the residential facility, i.e. medical attention, medication. Reassessment every 30 days. For services longer than 30 days, certificate of need must be completed and submitted to the drug court justifying the need for additional service days.

Pharmacological Interventions/Psychiatric Evaluations/Medication Monitoring

This service provides for diagnostic assessment and/or consultation to determine behavioral/mental health problems and may recommend intervention, treatment or review and adjustment of psychotropic medications.

Evaluation Services: Shall be provided by a physician (M.D. or D.O.) who meets the state licensure requirements in accordance with [Arizona Revised Statutes, Title 32, Chapter 13, Article 2, et seq., or Title 32 Chapter 17, Article 2, et seq.](#)

Client sessions shall be maintained in the VMS.

Acceptable billing unit: Per Medication Monitoring or Per Evaluation.

Psychological Evaluation

This service provides for specific assessment and / or consultation to determine and address behavioral health problems and may recommend or advise certain treatment interventions. Consultation may consist of providing assistance in planning, developing and implementing programs or treatment plans as well as staff consultation and/or training.

Psychologists shall be licensed by the Board of Psychologists Examiners under Arizona Revised Statutes, [Title 32, Chapter 19, Articles 2 & 3](#). All testing must be performed through standardized and non-abbreviated psychometric assessments unless abbreviated assessments are clinically appropriate. All diagnostic statements shall conform to current DSM IV terminology. Psychologists contracted to complete Psychological Evaluation/Treatment services shall:

1. Review referral material and questions, assess the individual's readiness for testing, and develop an evaluation strategy.
2. In accordance with the testing strategy, conduct any or all of the following:
 - a. Intellectual testing
 - b. Personality testing
 - c. Projective testing

3. Utilize widely accepted psychometric assessments.
4. Produce written diagnosis and treatment recommendations submitted to the contract drug court.
 - a. Tests results
 - b. Interpretations of the data
 - c. Diagnostic statement which conforms to current DMS IV terminology
 - d. Specific treatment recommendations
5. Assist with identifying and referring clients to the appropriate intervention service that meets the client's needs.
6. Maintain services rendered in the VMS.

Accepted Billing Unit: Assessment. Allow for costs associated with producing the assessment and referral services in the per assessment amount.

Co-Occurring Treatment Services

Co-occurring treatment services include the treatment of individuals experiencing co-occurring substance use (abuse or dependence) and mental disorders. Clients said to have Co-occurring Disorders (COD) have one or more mental disorders as well as one or more disorders relating to the use of alcohol and/or other drugs. An integrated treatment approach is suggested whereby treatment interventions for co-occurring disorders are combined within the context of a primary treatment relationship or service setting. It recognizes the need for a unified treatment approach to meet the substance abuse, mental health, and related needs of a client, and is the preferred model of treatment.

SAMHSA/CSAT TIP 42 defines Dual Diagnosis Capable programs as: *Dual diagnosis capable (DDC)* programs are those that “address co-occurring mental and substance-related disorders in their policies and procedures, assessment, treatment planning, program content and discharge planning” (ASAM 2001, p. 362). Even where such programs are geared primarily to treat substance use disorders, program staff are “able to address the interaction between mental and substance-related disorders and their effect on the patient's readiness to change—as well as relapse and recovery environment issues—through individual and group program content” (ASAM 2001, p. 362).

Dual diagnosis enhanced programs have a higher level of integration of substance abuse and mental health treatment services. These programs are able to provide primary substance abuse treatment to clients who are, as compared to those treatable in DDC programs, “more symptomatic and/or functionally impaired as a result of their co-occurring mental disorder” (ASAM 2001, p. 10). Enhanced-level services “place their primary focus on the integration of services for mental and substance-related disorders in their staffing, services and program content” (ASAM 2001, p. 362).

Programs offering Co-occurring Treatment Programs shall minimally:

1. Offer counseling/mental health services by appropriately licensed personnel.
2. Complete assessment/evaluation services that identify both the level of substance abuse treatment and mental health interventions needed to meet the client's needs and/or integrated services through collaboration between substance abuse and mental health treatment programs.

3. Treatment planning that includes goals and objectives that meet the substance abuse and mental health needs of the client. Treatment plan updates shall be completed every 90 days or as needed for significant behavioral changes exhibited by the client.
4. Maintain progress notes.
5. Maintain services rendered in the VMS.

Acceptable Billing Unit: Per face to face session. Session defined per contract.

Family/Marital Counseling

Services engage the whole family system to address interpersonal communication, codependency, conflict, marital issues and concerns, parenting issues, family reunification, and strategies to reduce or minimize the negative effects of substance abuse on the relationship within the family system. Providers offering Family/marital counseling shall minimally:

1. Complete an assessment to identify strengths and deficits of the marital/family relationship and develop objectives for the treatment.
2. Document sessions in client case notes.
3. Provide progress reports to the drug court as requested.
4. Complete a discharge summary noting the progress or lack of progress of the intervention and continued care needed to maintain increased functioning.
5. Maintain services rendered in the VMS.

Acceptable Billing Unit: Per session. Session includes 50 minutes of interaction with the family or family member and 10 minutes to record case notes. Allow for costs of completing progress reports and discharge summary in the billing unit rate.

CHOICES RECOVERY SUPPORT SERVICES

Recovery Support Services (RSS) aid the client with needed services beyond the traditional programs usually associated with substance abuse treatment. These services are important to the habilitation of the whole individual to help change lifestyles, attach clients to pro-social organizations, and improve their physical, psychological and spiritual health.

All Recovery Support Service (RSS) providers shall comply with the following criteria except as limited in the description and as determined by the type of service and State and Federal laws pertaining to the service and/or service location:

- Registration with the Secretary of State, [if legally required to do so](#) for licensing and/or certification.
- Compliance with occupancy and zoning permits, **if lawfully required to do so** by city, state and/or federal laws.
- Hold any **legally required** business licenses.

- Governing body ([board of directors](#)) to guide program operations if a non-profit organization providing human services to clients. (The hyperlink provides information to organizations. This information should be used as an overview. Please seek professional advice when necessary.)
- Fiscal management practices consistent with accepted accounting principles.
- Risk Management strategy/adequate insurance to cover risks.
- One year experience providing the same type of Recovery Support Service (RSS) in community.
- Ability to access Internet download forms, billing and voucher information.
- Provide appropriate and allowable services to clients as authorized by voucher.
- Maintain a file for each client and report all specified data.
- Participate in training and be subject to random onsite visits to include case file service and fiscal auditing.
- Confidentiality Policies and Procedures designed to effectively protect client's personal information and participation in treatment and recovery services from unauthorized disclosure.
- Policy and Procedure Manual if providing human services which contains:
 - Organization's purpose and philosophy.
 - Standards of conduct for staff and volunteers.
 - Boundaries, supervision, conflict of interest.
 - Training.
 - Client rights and grievances procedures.
- Organizational structure; 501c3, non-profit, sole-proprietor.
- Written contract with County Probation Department outlining compliance with above objectives, specific county requirements, etc.

RSS Providers must comply with all requirements for services and documentation that may be required by each drug court in addition to those listed in this Provider Handbook. Each drug court will complete procurement procedures that may require additional service activities than those listed herein. The requirements in this Handbook are minimums and do not limit the drug courts from requiring further documentation and/or services from providers. This Handbook only provides technical assistance to those providers desiring to provide services through the CHOICES initiative. The information in this Handbook does not bind the drug courts, nor does it replace each drug court's procurement processes.

APPROVED RECOVERY SUPPORT SERVICES:

Transportation (to and from treatment, RSS activities, employment, etc.)

Commuting services are provided to clients who are engaged in treatment- and/or recovery support-related appointments and activities and who have no other means of obtaining transportation. Forms of transportation services may include public transportation or a licensed and insured driver who is affiliated with an eligible program provider. In order for providers, other than public transportation authorities, to provide, and be eligible for reimbursement through the CHOICES program, must:

1. Utilize drivers licensed in the State of Arizona. Drivers utilizing vans and buses must possess the appropriate license under Arizona law. Providers shall maintain a copy of the driver's license.
2. The vehicle is safe and in good repair.
3. Contains a working heating and air conditioning system.

4. The transporter is at least 21 years of age.
5. Maintain yearly Arizona driving records from ADOT on each driver.
6. Minimum \$1,000,000 of combined single limit liability insurance on the driver of the transport vehicle, proof of insurance is in the vehicle, and the vehicle is registered and licensed in the State of Arizona.
7. Maintain mileage logs listing the date, time, destination, and client(s) transported.
8. The driver does not wear headphones or utilize a cellular telephone while the vehicle is in motion.
9. The driver does not leave the vehicle and client unattended.
10. The driver and all passengers utilize their seat belts while the vehicle is in motion.
11. Ensure sufficient number of staff per client ratio to ensure each passenger's safety.
12. Maintain services rendered in the VMS.

Accepted Billing Unit: Per Mile Cost, varies per trip, per pass. Include the cost of documentation/VMS in the per mile cost.

Child care

These services include care and supervision provided to a client's child(ren), less than 14 years of age and for less than 24 hours per day, while the client is participating in treatment and/or recovery support services. These services must be provided in a manner that complies with State law regarding child care facilities. Child care providers must:

1. Be licensed as a [child care provider](#) in the State of Arizona and follow all licensing requirements.
2. Provide a copy of your Arizona child care facility license with your RSS application.
3. Maintain Arizona licensure as required by the Department of Health Services.
4. Maintain services rendered in the VMS.

Accepted Billing Unit: Hourly up to 8 hours per day during voucher period. Include cost for documentation and VMS activities in the hourly rate.

Peer-to-peer services, mentoring, coaching

Mutual assistance in promoting recovery may be offered by other persons who have experienced similar substance abuse challenges. These services focus more on wellness than illness. Mentoring and coaching may include assistance from a professional who provides the client counsel and/or spiritual support, friendship, reinforcement, and constructive example. Mentoring also includes peer mentoring which refers to services that support recovery and are designed and delivered by peers---people who have shared the experiences of addiction recovery. Recovery support is included here as an array of activities, resources, relationships, and

services designed to assist an individual's integration into the community, participation in treatment, improved functioning or recovery. Mentor services shall be delivered under the auspices of an agency/organization that complies with all requirements on the RSS application. To offer these services, providers must:

1. Disclose any criminal background of mentors to the CHOICES program. Mentors who are providing services cannot currently be on probation or have any prior or pending charges of a sexual or violent nature. Information shall remain confidential.
2. Disclose any substance abuse history of mentors to the CHOICES program. All mentors must be substance free for 1 year prior to providing mentoring services. Information shall remain confidential.
3. Maintain mentoring records of activities.
4. [Mentoring plan](#) that states the goals and objectives of the mentoring relationship, length of service, and progress updates, as appropriate, during the mentoring service delivery.
5. Complete mentoring [discharge summary](#) when services are terminated.
6. Maintain services rendered in the VMS.

Accepted Bill Unit: Hourly if sporadic and when needed by client; monthly if organized activity provided on the treatment plan. Include the costs of supplies, documentation and VMS activities in the billing unit.

Spiritual and Faith-Based Support Education

These services assist an individual or group to develop spiritually. Activities might include, but are not limited to, establishing or reestablishing a relationship with a higher power, acquiring skills needed to cope with life-changing incidents, adopting positive values or principles, identifying a sense of purpose and mission for one's life, and achieving serenity and peace of mind. Faith-based services include those provided to clients and using spiritual resources designed integrate better their faith and recovery.

Such services are usually provided in a religious or spiritual setting by spiritual leaders or other staff who are knowledgeable about the spiritual values of the community and are equipped to assist individuals in finding spirituality. Services include, but are not limited to, social support and community-engagement services, faith, or spirituality to assist clients with drawing on the resources of their faith tradition and community to support their recovery; mentoring and role modeling; and pastoral or spiritual counseling and guidance. Providers offering spiritual support services shall:

1. Provide spiritual support in an organized session, class, counseling or other group/individual structure.
2. Provide written description of the purpose and activities of the spiritual education program.
3. Provide the names and credentials of the group leader, teacher, or organizer.
4. Complete [Progress Notes](#) for each session, see sample.
5. Complete a [Discharge Summary](#) upon service termination, see sample.
6. Maintain services rendered in the VMS.

Accepted Billing Unit: Per session/class/activity. Approval must be before activity. Voucher issued prior to delivery of service.

Life Skills

Specific instruction to clients in order that specific skill sets may be improved or developed. Providers offering life skills instruction must offer a program that includes, but is not limited to the following skills;

- budgeting
- communication
- conflict resolution
- household management
- refusal skills
- employment skills

Providers must also;

1. Employ instructors with at least a GED/High School Diploma.
2. Employ instructors with specific training in life skills instruction. Credentials/training must be submitted with RSS application.
3. Provide written curriculum for the class/sessions.
4. Maintain attendance/sign in sheets for participants for audit purposes.
5. Maintain class notes that identify the subjects cover in each class/session.
6. Provide a termination report that includes the successful or unsuccessful termination of the client.
7. Maintain services rendered in the VMS.

Accepted Billing Unit: Cost per session/class. Costs for supplies, equipment, workbooks, text books, and testing should be considered in billing unit. Consider documentation and VMS activity.

Employment Services and Job Training

These activities are directed toward improving and maintaining employment. Services include skills assessment and development, job coaching, career exploration or placement, job shadowing or internships, résumé writing, interviewing skills, and tips for retaining a job. Other services include training in a specific skill or trade to assist individuals to prepare for, find, and obtain competitive employment such as skills training, technical skills, vocational assessment, and job referral. Providers offering employment services and job training may offer an array of programs to include but are not limited to the following:

1. Career Assessment.
2. Work Readiness classes/instruction.
3. Opportunities for job shadowing and on the job training with businesses in the field of client's interest.

4. Liaison activities between the client and educational opportunities to include Adult Basic Education, Technical Schools/Colleges or Colleges/Universities offering college degrees.
5. Financial aid application assistance if client enrolls in educational programming.

Providers shall:

1. Complete a summary of the career assessment and a case plan for developing skills and/or assisting client obtain employment within their interests.
2. Provide instruction/support services to address any deficits in basic skills to aid client in obtaining skills necessary for employment.
3. Maintain client notes of activities.
4. Provide progress reports as requested by the drug court.
5. Complete a discharge summary noting the client's progress and employment readiness or current employment.
6. Maintain services rendered in the VMS.

Acceptable Billing Unit: Per client session/class/contact. Costs for supplies, equipment, workbooks, text books, and testing should be considered in billing unit. Consider documentation and VMS activity.

Billing Units for on the job training and job shadowing shall be negotiated with the appropriate drug court and be based upon the job type and standard pay for entry level positions in the respective field.

Family/Marriage Education

Services provided to engage the whole family system to address interpersonal communication, codependency, conflict, marital issues and concerns, parenting issues, family reunification, and strategies to reduce or minimize the negative effects of substance abuse on the relationship within the family system. Providers offering Family/Marriage Education services shall:

1. Offer educational programming, involving all family members of appropriate age, about the recovery process.
2. Offer parenting educational programming to the parental unit to strengthen parenting skills.
3. Maintain case notes on sessions/classes.
4. Complete Progress Reports as requested by Drug Court.
5. Complete Discharge Summary upon program completion.
6. Maintain rendered services in VMS.

Acceptable Billing Unit: Per session/class.

Indigenous Healing

These services are designed to address emotional and/or behavioral issues which impact a client's functional ability. Services are provided by qualified and tribe recognized traditional healers. Traditional healing programs shall:

1. Review existing social history and other relevant information.
2. Provide indigenous healing methods according to completed treatment plan and referral creating goals and objectives for the healing techniques used.
3. Maintain progress notes and document all services.
4. Prepare and provide monthly progress reports to drug court. Provide reports as requested or as required in the contractual agreement. Document in VMS.

Acceptable Billing Unit: Per session. Hour session shall be a 60 minute session. (50 minutes for direct service/10 minutes for documentation/VMS activities)

Housing Assistance and Services (transitional housing, sober housing, etc.)

These services include transitional housing, recovery living centers or homes, supported independent living, sober housing, short-term and emergency or temporary housing, and housing assistance or management. These services provide a safe, clean, and sober environment for adults with substance use disorders.

Lengths of stay may vary depending on the form of housing. This assistance also includes helping families in locating and securing affordable and safe housing, as needed.

Assistance may include accessing a housing referral service, relocation, tenant/landlord counseling, repair mediation, and other identified housing needs. Providers offering transitional housing services shall:

1. If offering the housing structure, comply with transitional housing requirements in Appendix (XX)
2. If offering independent housing location and/or placement services, fulfill the following:
 - a. Coordinate the application process to help client obtain independent rental housing.
 - b. Assist client in obtaining utilities, utilities assistance, if eligible.
 - c. Inspect the potential rental structure to ensure the residence is safe and conducive to habitation.
 - d. Determine total costs to obtain property.
 - e. Review client's budget and ensure rental property is within client's means.
 - f. Coordinate with the drug court to obtain rental payment approval. Utilize [Rental Budget Worksheet](#) to obtain payment approval.
 - g. Maintain services rendered in the VMS.

Acceptable Billing Unit: If providing the housing structure, per client day. If providing placement services, per placement costs, excluding the cost of the rental properties, utility deposits and rental fees. Rental and utility costs will be billed separately if approved by drug court. Rental payment will be limited to 2 months rent during treatment process, based upon the need of the client. Sober living homes will be limited to a maximum of 90 days paid by the court and at the discretion of the court.

Education Services

Educational Services include, but are not limited to: GED Preparation, instruction and support activities to prepare individuals to pass the high school equivalency examination (GED). Tutoring, which can include instruction in basic reading, writing and/or arithmetic skills to individuals performing at or below appropriate grade level. Providers offering educational services must:

1. Employ Arizona certified teachers to provide direct services or oversee non-certified instructors.
2. Non-certified personnel providing educational support services shall be at least 21 years of age, have at least a GED or High School Diploma and direct supervision from a certified teacher.
3. Offer assessment services to measure the educational skills of referred clients.
4. Offer effective written curriculum and structured programs designed to address educational deficits and build on strengths.
5. Regularly measure the progress of clients through testing and skill demonstration projects.
6. Provide written monthly progress reports to the drug court while client is receiving services.
7. Provide a discharge summary of activities of the client that signifies successful or unsuccessful termination.
8. Maintain services rendered in the VMS.

Accepted Billing Unit: Cost per session/class. Please include time for documentation and VMS activities.

Alcohol/Drug Testing

Monitoring drug use through urinalysis or other objective methods, as part of treatment or criminal justice supervision, provides a basis for assessing and providing feedback on the participant's treatment progress. Providers offering alcohol/drug testing services must:

1. Services shall be provided by a medical laboratory which meets state licensure requirements as specified in A.R.S Title 36, Chapter 4. Medical laboratories must be registered in accordance with the federal Clinical Laboratory Improvement Amendments ([CLIA](#) of 1988, P.L. 100-578 (42 United States codes 263a) and code of Federal Regulations 42 Part 493.

2. Analyze the urine or oral fluid sample using approved immunoassay techniques and report results in writing.
3. Testify in court if necessary.
4. Perform a second immunoassay screen on all samples that test positive in order to confirm the original test.
5. Store all positive samples for a period of one year. Notify the authorizing probation department of the intent to destroy stored samples in time to allow the probation department to notify the contractor whether the sample needs to be retained for court purposes.
6. Comply with AOC Administrative Order 95-20 and all subsequent Administrative Orders governing Drug and Alcohol Testing.

Accepted Billing Unit: Cost per drug test encounter. Service voucher will signify a single test or a request for a 3,4,5,6,7,8,9,10 panel test signifying the multiple tests requested. Court appearance fee should be included drug test cost.

Family Support Services

This service should be provided by a licensed agency and involves face-to-face interaction with family member(s) and is directed toward restoration, enhancement or maintenance of the family function to improve the family's ability to effectively interact with the client in the home and community.

The service may involve support activities such as assisting the family in developing skills to effectively interact, understand the causes and treatment of behavioral health issues, understand and utilize the system, and plan long term for the client and the family.

1. Providers offering Family Support Services shall offer services:
 - a. Facilitate communication between family members.
 - b. Teach parents how to discipline children living in the home.
 - c. Teach positive conflict resolution skills.
 - d. Provide parent/child mediation.
 - e. Teach family members about addiction.
 - f. Attach family members to community support programs designed to address addiction.
2. Family Support programs shall:
 - a. Complete an assessment with the family to identify strengths and needs.
 - b. Design a skill building plan with goals and objectives that outline the services needed to stabilize the family and reduce risk for conflict and poor family management.

- c. Complete progress notes on each family encounter to document steps taken in the support relationship.
 - d. Complete monthly progress reports and submit to the drug court case manager.
 - e. Complete a discharge summary when services are terminated.
 - f. Maintain rendered services in the VMS.
3. Personnel employed by a service provider to deliver Family Support Services shall minimally:
- a. Hold a Bachelor's Degree.
 - b. Possess documented training in family support services.
 - c. Fingerprint clearance card.
 - d. Have a criminal record that documents no sexually based offenses as defined by ?

Accepted Billing Unit: Cost per session, per contract. Costs for supplies, equipment, workbooks, text books, and testing should be considered in the total session or program cost.

GAP FUNDING

Gap funding comprises goods needed by clients to sustain or meet immediate life sustaining items and/or help them be successful with fulfilling their Clinical/RSS treatment plan. GAP funding can provide the following to clients in need:

- 1. Clothing related to obtaining employment.
- 2. Shoes related to obtaining employment.
- 3. Diapers for dependants of clients.
- 4. Food (Providers should access all charitable food banks and utilize Gap funds for items not available).
- 5. Baby Formula for dependants of clients.
- 6. Automobile Repairs if alternative transportation is unavailable.
- 7. Work Supplies as documented by employer.
- 8. Cleaning Supplies to sustain a safe and healthy living environment.
- 9. Household Repairs to sustain a safe and healthy living environment.
- 10. Utility Payments (limited to two months during the treatment period).
- 11. Telephone Services (limited to two months during the treatment period and shall pay for local calls only. 900 numbers or long-distance calls are not reimbursable).
- 12. Essential Electronics-such as telephone, alarm clock.
- 13. Educational Materials-if client is in training or enrolled and attending educational services.
- 14. Tuition for job related training-as necessary to obtain skills to become employed or employable.

Providers must complete a GAP funding application in order to receive reimbursement. The application must be submitted to and approved by the appropriate drug court prior to rendered services. Once approved, the drug court case manager will initiate a voucher for the item(s). The provider is required to purchase the item(s) for the client. **UNDER NO CIRCUMSTANCES SHALL A PROVIDER GIVE CASH TO A CLIENT TO PURCHASE ITEMS FROM THE GAP FUND.** The provider shall document the purchase in the client file and keep the receipt for the purchase on file for auditing purposes.

STANDARD CONTRACT TERMS

All RSS providers shall comply with the minimum contractual terms as listed below. RSS providers may be required to comply with additional contractual terms as required by each individual county drug court. For information on additional contractual terms required by drug courts, please click on the appropriate drug court listed below:

Maricopa County Adult Drug Court
Pima County Adult Drug Court
Yavapai County Adult Drug Court.

MINIMUM CONTRACTUAL TERMS AND CONDITIONS

- ✓ All payments shall be for Drug Court clients approved for services rendered as prescribed by the ATR grant.
- ✓ Reimbursement shall not be paid for pretrial services.
- ✓ All contractors shall utilize the Voucher Management System (VMS) as required under ATR grant conditions.
- ✓ The goal of ATR is to ensure genuine, free, and independent client choice for clinical treatment and recovery support services at the appropriate level of care. Therefore, this contract does not guarantee a minimum number of referrals, hours, or reimbursement for services rendered under the attached contract.